

1.) CORPORATION NAME:

MAZZETTI NASH LIPSEY BURCH, INC.

DUE DATE: **9/30/2011**

SCC ID NO: **F1436247**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CORPORATION SERVICE COMPANY

Bank of America Center, 16th Floor

1111 East Main Street

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

RICHMOND, VA 23219

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

CA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 530 BUSH ST STE 300

CITY/ST/ZIP: SAN FRAN, CA 94108-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

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OFFICER

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DIRECTOR

NAME: WALTER N VERNON
TITLE: PRESIDENT
ADDRESS: 530 BUSH ST STE 300
CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94108-

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OFFICER

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DIRECTOR

NAME: DARRYL WANDRY
TITLE: TREASURER
ADDRESS: 530 BUSH ST STE 300
CITY/ST/ZIP/CO: SAN FRAN, CA 94108-

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OFFICER

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DIRECTOR

NAME: JOHN KARMIRIS
TITLE: DIRECTOR
ADDRESS: 530 BUSH ST STE 300
CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94108-

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OFFICER

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DIRECTOR

NAME: JOHN M PAPPAS
TITLE: PRESIDENT
ADDRESS: 530 BUSH ST STE 300
CITY/ST/ZIP/CO: SAN FRAN, CA 94108-

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OFFICER

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DIRECTOR

NAME: JON INMAN
TITLE: DIRECTOR
ADDRESS: 530 BUSH STREET
SUITE 300
CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94108-

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KARL ATTEBERRY DIRECTOR 520 SW SIXTH AVENUE PORTLAND, OR 97204-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TOM PRIDE DIRECTOR 520 SW SIXTH AVENUE PORTLAND, OR 97204-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	EDWARD SPIVEY LIPSEY DIRECTOR 3322 WEST END AVENUE SUITE 620 NASHVILLE, TN 37203-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEVE BURCH DIRECTOR 3322 WEST END AVENUE NASHVILLE, TN 37203-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PETI JONES-THOMPSON DIRECTOR 12727 FEATHERWOOD DRIVE SUITE 285 HOUSTON, TX 77034-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHRIS POLAND DIRECTOR 235 MONTGOMERY STREET SUITE 500 SAN FRANCISCO, CA 94104-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID EVANS DIRECTOR 2100 SW RIVER PARKWAY POTLAND, OR 97201-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ DARRYL WANDRY	DARRYL WANDRY, TREASURER	1/19/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		